

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 I.53(b))</i>	Attorney Docket No.	38156.0004
	First Inventor	Paul J. Walsh
	Title	Variable Constant Volume, etc.
	Express Mail Label No.	ER 463985695 US

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		ADDRESS TO: Mail Stop Patent Application Commissioner for Patents, P.O. Box 1450 Alexandria, Virginia 22313-1450
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i></p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages / 18 /] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets / 1 /]</p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages / 2 /] <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies </p>
ACCOMPANYING APPLICATION PARTS		
<p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent</p> <p>17. <input checked="" type="checkbox"/> Other: <u>check: \$385.00</u></p>		

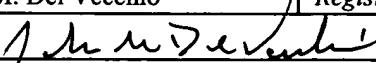
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of the prior application No: / _____

Prior application information: Examiner: _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number:	26712	OR	<input type="checkbox"/> Correspondence address below		
NAME		John M. Del Vecchio			
		Hodgson Russ LLP			
ADDRESS		One M&T Plaza, Suite 2000			
CITY	Buffalo	STATE	New York	ZIP CODE	14203-2391
COUNTRY	United States of America	TELEPHONE	(716) 856-4000	FAX	(716) 849-0349
Name (Print/Type)		John M. Del Vecchio		Registration No. (Attorney/Agent)	42,475
Signature				Date	November 21, 2003

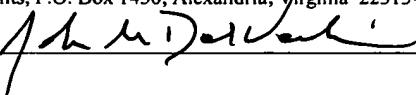
"Express Mail" Mailing Label Number ER 463985695 US

Date of Deposit November 21, 2003

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

John M. Del Vecchio

Signature



873502

FEE TRANSMITTAL for FY 2004

Effective 01/01/2003. Patent Fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

6569 12100				Application Number			
				Filing Date		November 21, 2003	
				First Named Inventor		Paul J. Walsh	
				Examiner Name			
				Group/Art Unit			
TOTAL AMOUNT OF PAYMENT		(\$385)		Attorney Docket Number		38156.0004	
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)			
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number: <u>08-2442</u> Deposit Account Name: <u>Hodgson Russ LLP</u> The Director is hereby authorized to (check all that apply)				3. ADDITIONAL FEES			
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any fee deficiencies or credit any overpayments <input type="checkbox"/> Charge any additional fees during pendency of this application. <input type="checkbox"/> Charge fees indicated below, except for the filing fee to the above-identified deposit account				Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
				1051 130	2051 65	Surcharge - late filing fee or oath	\$
				1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	\$
				1053 130	1053 130	Non-English specification	\$
FEE CALCULATION				1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1. BASIC FILING FEE				1804 920*	1804 920*	Requesting Publication of SIR prior to Examiner Action	
Large Entity Small Entity				1805 1,840*	1805 1,840*	Requesting Publication of SIR after Examiner Action	
1001 770 2001 385 Utility filing fee				\$385	1251 110	2251 55	Extension for reply within first month
1002 340 2002 170 Design filing fee				\$	1252 420	2252 210	Extension for reply within second month
1003 530 2003 265 Plant filing fee				\$	1253 950	2253 475	Extension for reply within third month
1004 770 2004 385 Reissue filing fee				\$	1254 1,480	2254 740	Extension for reply within fourth month
1005 160 2005 80 Provisional filing fee				\$	1255 2,010	2255 1,005	Extension for reply within fifth month
SUBTOTAL (1)				\$385	1401 330	2401 165	Notice of Appeal
2. EXTRA CLAIM FEES FOR UTILITY/ REISSUE				Fee Paid	1402 330	2402 165	Filing a brief in support of an appeal
Total Claims / / - 20** = / / x / / =				\$	1403 290	2403 145	Request for oral hearing
Independent Claims / / - 3** = / / x / / =				\$	1451 1,510	1451 1,510	Petition to institute a public use proceeding
Multiple dependent / / x / / =				\$	1452 110	2452 55	Petition to revive - unavoidable
Large Entity Small Entity				1453 1,330	2453 665	Petition to revive - unintentional	
Fee Code (\$) Fee Code (\$) Fee Description				1501 1,330	2501 665	10 advance copies Utility issue fee (or reissue)	
1202 18 2202 9 Claims in excess of 20				1502 480	2502 240	Design issue fee	
1201 86 2201 43 Independent claims in excess of 3				1503 640	2503 320	Plant issue fee	
1203 290 2203 145 Multiple dependent claim if not paid				1460 130	1460 130	Petitions to the Commissioner	
1204 86 2204 43 **Reissue independent claims over original patent				1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent				1806 180	1806 180	Submission of Information Disclosure Statement	
SUBTOTAL (2)				\$	8021 40	Recording each patent assignment per property (times number of properties)	
SUBMITTED BY: John M. Del Vecchio Reg. No. 42,475				1809 770	2809 385	Filing a submission after final rejection(37 CFR 1.129(a))	
SIGNATURE <i>John M. Del Vecchio</i>				1810 770	2810 385	For each add'l invention to be examined(37 CFR 1.129(b))	
DATE: November 21, 2003 Telephone: (716) 848-1644				1801 770	2801 385	Request For Continued Examination (RCE)	
				1802 900	1802 900	Request for Expedited Examination of a design application	
				Other fee (specify)			
				*Reduced by basic filing fee paid SUBTOTAL (3)			

Express Mail Mailing Label Number ER 463985695 US

Date of Deposit November 21, 2003

I hereby Certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

John M. Del Vecchio
NameSignature *John M. Del Vecchio*November 21, 2003
Date of Signature

873489